ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	mm	852	04-24-01
RESPONSE FORMALITY REVIEW	mm	780	6-5-01

INDEX OF CLAIMS

✓ ..... Rejected
= ..... Allowed
— (Through numeral)... Canceled
÷ ..... Restricted
N ..... Non-elected
I ..... Interference
A ..... Appeal
O ..... Objected

Claim Final	Claim Original	Date	Date	Date
	1	✓		
	2			
	3			
	4	✓		
	5	✓		
	6	✓		
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	12	✓		
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	14	✓		
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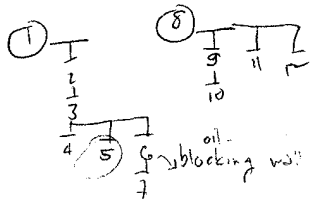

"PRIOR ART"

If more than 150 claims or 10 actions staple additional sheet here

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